

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b> <b>OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, &amp; 30</b>					1. REQUISITION NO.		PAGE 1 OF 32					
2. CONTRACT NO.		3. AWARD/EFFECTIVE DATE		4. ORDER NO.		5. SOLICITATION NO. <b>N00014-06-R-0001</b>		6. SOLICITATION ISSUE DATE <b>October 13, 2005</b>				
7. FOR SOLICITATION INFORMATION CALL		a. NAME <b>John T. McCain</b>				b. TELEPHONE NO. <i>(No collect calls)</i> <b>(703) 696-0975</b>		8. OFFER DUE DATE/LOCAL TIME <b>October 28, 2005/3:00pm</b>				
9. ISSUED BY OFFICE OF NAVAL RESEARCH ONR 0253 John T. McCain, (703)696-0975 E-mail mccainj@onr.navy.mil 875 NORTH RANDOLPH STREET SUITE 1425 ARLINGTON, VA 22203-1995				10. THIS ACQUISITION IS <input checked="" type="checkbox"/> UNRESTRICTED  <input type="checkbox"/> SET ASIDE: % FOR  <input type="checkbox"/> SMALL BUSINESS  NAICS: 541690 SIZE STANDARD: \$6,000,000		11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE		12. DISCOUNT TERMS  <b>NET 30</b>				
						<input checked="" type="checkbox"/> 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)						
						13b. RATING DOC9(J)						
						14. METHOD OF SOLICITATION <input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input checked="" type="checkbox"/> RFP						
15. DELIVER TO  <b>SEE PAGE 2</b>				N00014		16. ADMINISTERED BY  <b>SAME AS BLOCK 9</b>						
17a. CONTRACTOR/ OFFEROR FACILITY CODE				18a. PAYMENT WILL BE MADE BY DEFENSE FINANCE AND ACCOUNTING SERVICE CENTER CHARLESTON OPERATING LOCATION DFAS CH VENDOR PAY DIVISION CODE FP PO BOX 118054 CHARLESTON SC 29423-8054								
<input type="checkbox"/> 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER				18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input checked="" type="checkbox"/> SEE ADDENDUM								
19. ITEM NO.		20. SCHEDULE OF SUPPLIES/SERVICES			21. QTY		22. UNIT		23. UNIT PRICE		24. AMOUNT	
		See Attached continuation sheet(s) for Blocks 19 - 24										
		(Attach Additional Sheets as Necessary)										
25. ACCOUNTING AND APPROPRIATION DATA								26. TOTAL AWARD AMOUNT (For Govt. Use Only) <b>See Page 2</b>				
<input checked="" type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.												
<input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED.												
28. <input type="checkbox"/> CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN ____ COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.					29. AWARD OF CONTRACT: REFERENCE ____ OFFER DATED ____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS:							
30a. SIGNATURE OF OFFEROR/CONTRACTOR					31a. UNITED STATES OF AMERICA <i>(SIGNATURE OF CONTRACTING OFFICER)</i>							
30b. NAME AND TITLE OF SIGNER <i>(TYPE OR PRINT)</i>			30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER <i>(TYPE OR PRINT)</i>			31c. DATE SIGNED				
32a. QUANTITY IN COLUMN 21 HAS BEEN  <input type="checkbox"/> RECEIVED <input type="checkbox"/> INSPECTED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT, EXCEPT AS NOTED					33. SHIP NUMBER  <input type="checkbox"/> PARTIAL <input type="checkbox"/>		34. VOUCHER NUMBER		35. AMOUNT VERIFIED CORRECT FOR			
32b. SIGNATURE OF AUTHORIZED GOVT REPRESENTATIVE			32c. DATE		36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL			37. CHECK NUMBER				
					38. S/R ACCOUNT NO.		39. S/R VOUCHER NO.		40. PAID BY			
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT					42a. RECEIVED BY <i>(Print)</i>							
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER			41c. DATE		42b. RECEIVED AT <i>(Location)</i>							
					42c. DATE REC'D <i>(YY/MM/DD)</i>		42d. TOTAL CONTAINERS					